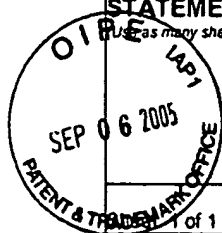


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INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT

(Use as many sheets as necessary)



Complete if Known

Application Number	09/893,187
Filing Date	June 27, 2001
First Named Inventor	Vikse, Gordon
Group Art Unit	2681
Examiner Name	Cai, Wayne Huu

Attorney Docket No: 2213.001US1

## US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate
<i>WVC</i>	US-2003/0130928A1	07/10/2003	Chozick, Eric R.	07/12/2002
<i>WVC</i>	US-6,587,684	07/01/2003	Hsu, Jay, et al.	07/28/1998
<i>WVC</i>	US-6,832,373	12/14/2004	O'Neill, Patrick J.	04/01/2003
<i>WVC</i>	US-6,836,657	12/28/2004	Ji, De, et al.	11/12/2002

## FOREIGN PATENT DOCUMENTS

Examiner Initials *	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T <sup>2</sup>
<i>WVC</i>	WO-0241147	05/23/2002	O'Neil, Patrick J.	

## OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
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EXAMINER

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Substitute Disclosure Statement Form (PTO-1449)

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